2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# L03000040062

Entity Name: FLEET GARD OF NORTH FLORIDA, LLC

Current Principal Place of Business:

6399 142ND AVE. N
SUITE 122
CLEARWATER, FL 33760

New Principal Place of Business:

13131 56TH COURT
SUITE 303
CLEARWATER, FL 33760

Current Mailing Address:

6399 142ND AVE. N
SUITE 122
CLEARWATER, FL 33760

New Mailing Address:

13131 56TH COURT
SUITE 303
CLEARWATER, FL 33760

FEI Number: 77-0600469 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOEBERI, BRENDEN
13575 58TH ST. N. SUITE 161
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WOLFE ENTERPRISES,
Address: 5851 SARREN CT.
City-St-Zip: CLEARWATER, FL

Title: MGR ( ) Delete
Name: SWISHER, DONANNE
Address: 6399 142ND AVE. N
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WOLFE ENTERPRISES,
Address: 5851 DARREN CT.
City-St-Zip: CLEARWATER, FL 33760

Title: MGR (X) Change ( ) Addition
Name: SWISHER, DONANNE
Address: 13131 56TH COURT SUITE 303
City-St-Zip: CLEARWATER, FL 33760

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DONANNE SWISHER MGR 04/29/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date